



Legal Division  
Pfizer Inc  
10777 Science Center Drive  
San Diego, CA 92121

**FACSIMILE TRANSMISSION**

**NOTICE OF CONFIDENTIALITY**

This transmission is intended only for the use of the Addressee and may contain information that is: 1. Subject to attorney/client privilege; 2. Attorney work product or 3. Confidential. If you are not the intended recipient, you are hereby notified that any dissemination, distribution or copying of the information contained in this facsimile is strictly unauthorized and prohibited. If you have received this facsimile in error, please notify us immediately by collect telephone call to the sender named below. Thank you.

**To: Commissioner For Patents**

**Location: P.O. Box 1450, Alexandria, VA 22313-1450**

**Facsimile Telephone: 703-872-9306**

**No. of Pages: (including cover sheet) 15 pages**

**From: Reena R. Desai**

**Department Name: Legal Division**

**Telephone: 858-526-4932**

**Date: February 24, 2005**

**MESSAGE:**

Transmitted herewith are the following documents:

- |   |                         |
|---|-------------------------|
| 1. Correction of Inventorship in an Application 37 CFR 1.48(a)    | 1 page;                 |
| 2. Statement of Inventorship in an Application 37 CFR 1.48 (a)(2) | 2 pages;                |
| 3. Statement Under 37 CFR 3.73(b)                                 | 1 page;                 |
| 4. Application Data Sheet   | 3 pages;                |
| 5. Power of Attorney  | 2 pages;                |
| 6. Oath and Declaration   | 2 pages;                |
| 7. Fee Transmittal  | 1 page + duplicate; and |
| 8. Total Fee Due \$130.00   | Deposit Account.        |

FAX COVERSHEET

Feb-24-05 15:28 From: pfizer la jolla  
PC25144A  
Correction of Inventorship

+8586788233

T-800 P.002/015 F-834

Certificate of Mailing (37 C.F.R. §1.10):  
I hereby certify that this correspondence is being  
deposited with the United States Postal Service as  
Express Mail (EV496345593US) in an envelope  
addressed to: , Commissioner for Patents, PO Box 1450,  
Alexandria, VA 22313-1450 on this  
24th day of February 2005.

/s/ Rachel Potash  
Rachel Potash

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re the Application of:  
SUZANNE BENEDICT, et al.,

Serial No.: 10/754,171

Filed: January 9, 2004

For: TRICYCLIC COMPOUNDS PROTEIN  
KINASE INHIBITORS FOR ENHANCING THE  
EFFICACY OF ANTI-NEOPLASTIC AGENTS  
AND RADIATION THERAPY

Group Art Unit: 1625

Examiner: Aulakh, Charanjit

Commissioner For Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**TRANSMITTAL LETTER**

Transmitted herewith are the following documents:

- |  |                  |
|--|------------------|
| 1. Correction of Inventorship in an Application 37 CFR 1.48(a)   | 1 page;          |
| 2. Statement of Inventorship in an Application 37 CFR 1.48(a)(2) | 2 pages;         |
| 3. Statement Under 37 CFR 3.73(b)                                | 1 page;          |
| 4. Application Data Sheet  | 3 pages;         |
| 5. Power of Attorney   | 2 pages;         |
| 6. Oath and Declaration  | 2 pages;         |
| 7. Fee Transmittal   | 1 page;          |
| 8. Return Postcard   | 1 postcard; and  |
| 9. Total Fee Due \$130.00  | Deposit Account. |

Respectfully submitted,

Date: 2/24/05

Reena R. Desai  
Reena R. Desai  
Agent For Applicants  
Registration No. 53,833

Agouron Pharmaceuticals, Inc./A Pfizer Company  
Patent Department  
10777 Science Center Drive  
San Diego, California 92121  
Phone: (858) 526-4932  
Fax: (858) 678-8233

PTO/SB/17 (12-04/02)

Approved for use through 07/31/2008, OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

(Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.)

Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4918).**FEE TRANSMITTAL**  
**For FY 2005**☐ Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$) 130.00**Complete if Known**

Application Number	10/754,171
Filing Date	January 9, 2004
First Named Inventor	Suzanna Benedict
Examiner Name	Aulakh, Charanjit
Art Unit	1625
Attorney Docket No.	PC25144A

**METHOD OF PAYMENT (check all that apply)**

- ☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_
- ☒ Deposit Account Deposit Account Number: 500329 Deposit Account Name: Aquron Pharmaceuticals,
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- ☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee
- ☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 ☒ Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-203B.

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

**2. EXCESS CLAIM FEES**

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
- 20 or HP = _____ x _____ = _____		
HP = highest number of total claims paid for, if greater than 20.		
<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>
- 3 or HP = _____ x _____ = _____		
HP = highest number of independent claims paid for, if greater than 3.		

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
_____ - 100 = _____	_____ / 50 = _____	(round up to a whole number) x _____		

**4. OTHER FEE(S)**

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Correction of inventorship

<b>Fees Paid (\$)</b>
130.00

**SUBMITTED BY**

Signature	<u>Reena R. Desai</u>	Registration No. (Attorney/Agent)	53,833	Telephone	858-526-4932
Name (Print/Type)	Reena R. Desai	Date	<u>2/24/05</u>		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.